

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	RSD		10/21/00
FORMALITY REVIEW	BZ	JC3-883	12-01-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      J ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 -/- ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	11/5/00
2	✓
3	✓
4	0
5	✓
6	✓
7	✓
8	✓
9	✓
10	0
11	✓
12	✓
13	✓
14	✓
15	✓
16	0
17	✓
18	✓
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20	✓
21	✓
22	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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